

Enclosure 1: Course Application
EMT-Intermediate / EMT-Paramedic

[] **Initial Intermediate Course**
[] **Initial Paramedic Course**

[] **Refresher Intermediate Course**
[] **Refresher Paramedic Course**

Course **Location** *(Include City!)* Assigned **Course Number** (see back)

First Day of Class / **Last Day of Class** / **Proposed Exam Date* & Location (City)**
The proposed exam date must FIRST be approved by Terry Horton!

Course **Textbook**

Student **Tuition**

Course **Primary Instructor**

Instructor **Phone Number**

Course **Coordinator**

Coordinator **Phone Number**

Course **Medical Director**

Med. Dir. **Phone Number**

Name **Advanced Training Center**

Name **Executive Director**

As Executive Director for the above training institution, I agree to and will abide by the following terms concerning this course:

- ◆ This course will use state approved DOT curriculum(s), textbook(s) & instructor(s).
- ◆ All equipment for this course has been inventoried and is in good, clean working order.
- ◆ All candidates accepted have met **all minimum entrance requirements** **PRIOR** to the start date of the course.
- ◆ Each candidate will read & sign the course ***Statement of Understanding*** (Enclosure 4).
- ◆ All candidate course applications (Enclosure 2) will be properly completed and maintained on file. Copies will be supplied upon request.
- ◆ All course records will be maintained and available for inspection by the DHEC Office of EMS at any time during and/or after the course.

Finally, I understand the DHEC Office of EMS reserves the right at any time to withdraw course approval authorization for any infringement of these terms.

Signature Executive Director

Date

THIS FORM **MUST** BE **RECEIVED** BY THE DHEC OFFICE OF EMS **PRIOR** TO THE COURSE START DATE.

COURSE NUMBERING SYSTEM

Updated July 2005

Effective with next course!

Following the two-digit **year** number, each course number consists of four (4) numbers. The **first number** indicates the **course level** (paramedic or intermediate). The **second number** indicates the **course type** (initial or refresher). The **third** and **fourth numbers** indicates the actual **course number**. The actual course numbers are divided among all currently authorized advanced training centers with numbers reserved for future training centers as follows:

Two-Digit Year Course Began: Example: 2005 would be: **05**

First Number: 9 = **Intermediate** courses 8 = **Paramedic** courses

Second Number: 1 = **initial** courses 2 = **refresher** courses

Third & Fourth Numbers: **Two Digit Course Numbers**

01 to 09 *Future Use*

10 to 19 Upstate Regional EMS course numbers

20 to 29 Midlands Regional EMS course numbers

30 to 39 Pee Dee Regional EMS course numbers

40 to 49 Lowcountry Regional EMS course numbers

50 to 54 Pee Dee Regional Community Training Center course numbers

55 to 59 Emergency Training Concepts course numbers

60 to 99 *Future Use*

10-D to 19-D Greenville Technical College AD Program course numbers

20-D to 29-D Florence-Darlington Technical College AD Program course numbers

30-D to 39-D Horry-Georgetown Technical College AD Program course numbers

40-D to 99-D *Future Use*

EXAMPLES: Paramedic course numbers:

05 - Two digit year (course began **2005**)

8 - Paramedic level course

1 - Initial course, **2** - Refresher course

00 - Two digit course number

EXAMPLES: Intermediate course numbers:

05 - Two digit year (course began **2005**)

9 - Intermediate level course

1 - Initial course, **2** - Refresher course

00 - Two digit course number